								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 CG 7C9330													
CLAIMS AS FILED - PART I (Column 1) (Column 2)							_	SMALL ENTITY TYPE O			OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS			19				Γ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		Ē	BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			/ minus 20=		• —		ı	X\$ 9=	\sim	OR	X\$18=	_	
INDEPENDENT CLAIMS			☐ minus 3 =		. 1		ŀ	X40=	-		X80≈	82	
MULTIPLE DEPENDENT CLAIM P			<u>-</u>				ŀ		/	OR		<i>(</i>)	
					- **** in a	olumn 2	L	+135=	<i></i>	OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	790	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL		
		(Column 1) CLAIMS	·	HIGH	ÆST		Γ		ADDI-			ADDI-	
NT A		REMAINING AFTER		PREVI	IBEA OUSLY	PRESENT EXTRA	1	RATE	TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT	Total	AMENDMENT	Minus	· PAID	FOR	_	t	X\$ 9=	166	OR	XS18=		,
ENC	Independent	• 0	Minus	2	¦ 	- 5	H	X40=			200=	00	
A		NTATION OF M	ULTIPLE DEP	ENDEN	T CLAIM		-	X4U=		OR	280=	1000.00	<i>*</i>
						•		+135=		OR	+270=	<u> </u>]
							Ä	TOTAL DOIT. FEE		OR	ADDIT. FEE		1
	_	(Column 1)			mn 2)	(Column 3)	_						1
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=		
SE SE	independent	•	Minus	***		a	١	X40=		OR	X80=		1
الا	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	T CLAIM		 	+135=			+270=		i
							L	TOTAL	<u> </u>	OR	TOTAL		1
							A	DDIT. FEE		OR	ADDIT. FEE	<u> </u>	1
 	(B) 7	(Column 1)	The Street Street		JMn 2) HEST	(Column 3)	٦,		1			1 .00:	1
ENT C		REMAINING AFTER AMENDMENT	* ***	NUI PREV	MBER TIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus			=		XS 9=		OR	XS18=		1
	Independent	·	Minus			=	t	X40=		OR	X80=		1
	FIRST PRESI	ENTATION OF N	IULTIPLE DE	PENDEN	NT CLAIM		lŀ			UH		+	1
					in 	rhumo 3	L	+135=		OR	+270=	<u> </u>	1
•	If the "Highest No	ımn 1 is less than ımber Previously I	Paid For IN TH	IS SPACE	is less th	an 20, enter 720.	٠,	TOTAL ODIT. FEE		OR	ADDIT. FEE		4
Ι"	"If the "Highest No	umber Previously	Paud For IN TH oid For (Total o	is SPACI v Indener	t is less th Month is th	an 3, enter 3. e hinhest numbe	er tou	nd in the a	poropriate bo	x in a	olumn 1.		1

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